



# DESIGNATION OF CERTIFYING OFFICIAL(S)

**PRIVACY ACT INFORMATION:** This report is authorized by law, 38 U.S.C.3684. You are not required to furnish the information, but are urged to do so, since payments to veterans and other eligible persons may be delayed or stopped if this form is not completed and returned. The information you submit may be disclosed outside VA only if the disclosure is authorized under the Privacy Act, including the routine uses identified in the VA system of records, 55VA21/22/28, Compensation, Pension, Education and Rehabilitation Records -VA, published in the Federal Register.

**RESPONDENT BURDEN:** VA may not conduct or sponsor, and respondent is not required to respond to this collection of information unless it displays a valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments regarding this burden estimate or any other aspect of this collection of information, call 1-800-827-1000 for mailing information on where to send your comments.

**PURPOSE:** This form is used to provide the names and signatures of those individuals who are authorized to certify enrollment information to the Department of Veterans Affairs.

1. NAME AND ADDRESS OF SCHOOL OR TRAINING ESTABLISHMENT (Include ZIP Code)	<b>FOR VA USE ONLY</b>					
	<b>PROFIT STATUS</b>				<b>TYPE</b>	
	<b>NAME</b>				<b>LOCATION</b>	

2. TELEPHONE NUMBER(S) OF CERTIFYING OFFICIAL(S) (Include Area Code)

3. THE FOLLOWING ARE DESIGNATED AS CERTIFYING OFFICIALS OF THIS SCHOOL OR TRAINING ESTABLISHMENT:

A. OFFICIALS DESIGNATED TO SIGN VA ENROLLMENT CERTIFICATIONS, CERTIFICATIONS OF CHANGE IN STUDENT STATUS, CERTIFICATIONS OF DELIVERY OF ADVANCE PAYMENTS AND EDUCATION LOANS, CERTIFICATIONS OF PURSUIT, ATTENDANCE, FLIGHT TRAINING, ON-THE-JOB OR APPRENTICESHIP TRAINING (as applicable), OTHER CERTIFICATIONS OF ENROLLMENT AND THE SCHOOL PORTION OF EDUCATION LOAN APPLICATIONS, ARE

NO.	NAME	TITLE	SIGNATURE
(1)			
(2)			
(3)			
(4)			

B. THE USE OF THE FOLLOWING FACSIMILE (e.g. rubber stamp) SIGNATURES FOR THE OFFICIALS LISTED IN ITEM 3A ABOVE ARE AUTHORIZED.

(1)	(2)
(3)	(4)

C. FOR POSTSECONDARY EDUCATIONAL INSTITUTIONS ONLY - OFFICIALS DESIGNATED TO SIGN THE SCHOOL PORTION OF VA FORM 22-1990T, APPLICATION AND ENROLLMENT CERTIFICATION FOR INDIVIDUALIZED TUTORIAL ASSISTANCE, ARE:

NO.	NAME	TITLE	SIGNATURE
(1)			
(2)			
(3)			

4. REMARKS

It is hereby certified that the Department of Veterans Affairs will be notified of any changes in the designations shown on this form as they occur.

5. SIGNATURE AND TITLE OF DESIGNATING OFFICIAL	6. DATE
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**PENALTY - The law provides that whoever makes any statement of a material fact knowing it to be false shall be punished by fine or imprisonment or both.**

## GENERAL INSTRUCTIONS

1. This form **MUST ONLY** be completed by a responsible official with the authority to designate certifying officials for the school or training establishment.
2. This form must be completed whenever there is a change in any of the information. Include the names, titles and signatures of all certifying official, not just the changed information.

## SPECIFIC INSTRUCTIONS

1. Item: enter the complete name and address of the school or training establishment.
2. Item 2: Provide the appropriate telephone number(s).
3. Item 3A: Enter the complete name and title of each designated certifying official. Have each person sign the form on the same line as his or her name and title. If any of the certifying officials have limited jurisdiction, note such limitations in Item 4, "Remarks". Use space below if needed.
4. Item 3B: If facsimile (e.g., rubber stamp) signatures will be used for any certifying official, enter a sample in the appropriate block. In addition, have the individual initial next to the sample
5. Item 3C: If veterans and other eligible persons will be claiming individualized tutorial assistance, complete these blocks.
6. Items 5 and 6: Sign and date the form. The person signing the form must be a person of significant authority, i.e., registrar, academic dean, or higher.